

BEST AVAILABLE COPY



CLAIMS ONLY

SERIAL NO. _____

FILING DATE _____

APPLICANT(S) _____

CLAIMS

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
|--------------|----------|------|------------------------|------|------------------------|------|
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
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| TOTAL IND. | | | 1 | 1 | | 1 |
| TOTAL DEP. | | 1 | 1 | 1 | 1 | 1 |
| TOTAL CLAIMS | | | | | | |

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| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
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| 100 | | | | | | |
| TOTAL IND. | 4 | | 1 | 1 | 1 | 1 |
| TOTAL DEP. | 63 | | 1 | 1 | 1 | 1 |
| TOTAL CLAIMS | 67 | | 1 | 1 | 1 | 1 |

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS